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INTER-AGENCY AGREEMENT BETWEEN THE ILLINOIS DEPARTMENT OF PUBLIC AID AND THE ILLINOIS DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES FOR MEDICAID COVERAGE FOR COMMUNITY HOSPITALS AND ATTENDING PHYSICIANS

This Inter-Agency Agreement identifies the responsibilities of the Department of Public Aid and the Department of Mental Health and Developmental Disabilities for providing Title XIX (Medicaid) coverage to eligible individuals that receive hospital services or physician services in DMHDD state-operated facilities or that are referred for treatment to community hospitals and physicians for such services. This Agreement applies to services delivered on or after July 1, 1978.

The Department of Public Aid (DPA) is the single state agency responsible for meeting federal Title XIX regulations, for establishing Title XIX eligibility, for providing payment for Title XIX services rendered to Public Aid recipients, and for auditing processed claims.

The Department of Mental Health and Developmental Disabilities (DMHDD) is the agency responsible for instituting a system of referral to community hospitals and is also responsible for instituting a system of procedures to prevent duplicate payment by DMHDD and/or DPA.

The two groups of patients residing in state-operated facilities who are included in this Agreement are:

1. Those individuals who are active public assistance recipients that receive hospital services or physician services at the DMHDD facility in which they reside.
2. Those individuals who are active public assistance recipients and who are temporarily discharged to community-based hospitals for purposes of receiving hospital or physician services and where payment is made to the hospital and attending physicians for services provided.

Those patients who are not eligible while residing in the DMHDD facility but who become eligible at the time of discharge to a community-based hospital are not covered by this Agreement.

A. Responsibilities of DMHDD.

The referral procedures instituted by DMHDD must include:

1. For those patients who are active public assistance recipients and that receive services at the DMHDD state-operated facility in which they reside:
 - a. Initiating Form DMHDD-30, Referral and Report (Consultation), required by clinical records guidelines.

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- b. Completing Form DMHDD-30, Physicians Report Section, which should be signed and dated by the physician on subsequent visit or by mail. 79-1
- c. Submitting charges to DPA following the month of service for the number of days services provided to each recipient at the established per diem rate.
- d. Maintaining a central file at each facility of one copy of the Form DMHDD-30 for the three-year period for internal audits and DPA audits.
- e. Maintaining a central file at each facility of one copy of Form C-13, Invoice-Voucher, for payment of contractual physicians for three-year period with names of recipients seen and/or treated and date of services on payment voucher.

In addition, DMHDD shall provide to DPA no later than October 1979, essential fiscal information and cost centers for services provided to Title XIX eligible recipients by the all inclusive per diem rate currently paid through the inter-departmental tape exchange.

2. For those patients temporarily discharged to community based hospitals:

- a. Providing a written request for service on Form DMHDD-31, Request for Service, to community hospital and/or physicians stating the DPA case category number and recipient number.
- b. Notifying local DPA office of patients referred to community-based hospitals by Form DMHDD-31.
- c. Informing the community hospital that claim for reimbursement should be processed for Title XIX eligible recipients in accordance with established DPA procedures.
- d. Maintaining a central file at each facility of one copy of the Form DMHDD-31, Request for Service, for three year period for internal audits and DPA audits.

B. Responsibilities of DPA.

- 1. Continue payment for Title XIX services for eligible recipients receiving treatment in state-operated facilities by tape exchange in accordance with established procedure.
- 2. Issue Form DPA 1411, Certificate for Interim Medical Care - Emergency Services, to general hospitals and/or attending physicians for eligible recipients who are temporarily discharged to general hospitals.

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3. Reimburse general hospitals and attending physicians for treatment of Title XIX recipients referred by DMHDD from state-operated facilities by Form DMHDD-31, through direct payment to hospitals and physicians by established procedures of the Department of Public Aid.
4. Conduct audits to insure DPA and DMHDD do not make duplicate payment to community hospitals and attending physicians for Title XIX services provided recipients temporarily discharged to community hospitals.

This Agreement, effective July 1, 1978, governs the responsibilities of DPA and DMHDD with regard to the system of referral, payments and audits for services rendered to Title XIX eligible individuals in DMHDD operated facilities referred for treatment and care to community hospitals and attending physicians.

This Agreement may be terminated by either party on thirty (30) days advance written notice.

Arthur F. Qeern

Date

12/23/78

Arthur F. Qeern, Director
Illinois Department of Public Aid

Robert DeVito, M.D.

Date

12/23/78

Robert DeVito, M.D., Director
Illinois Department of Mental Health
and Developmental Disabilities

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INTERAGENCY AGREEMENT
BETWEEN
ILLINOIS DEPARTMENT OF PUBLIC AID (IDPA)
AND
ILLINOIS DEPARTMENT OF PUBLIC HEALTH (IDPH)

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1. Whereas the Department of Public Aid (IDPA) and the Department of Public Health (IDPH), wish to promote optimum utilization of health services for parents and children under 21 years of age provided through Title V programs to reduce infant and maternal mortality and morbidity and to promote the health of parents and children covered by the State's Medicaid Program;
2. Whereas IDPA and IDPH wish to insure that recipients of public assistance who are eligible by age or condition for existing Title V programs are provided preventive, screening, diagnostic, and treatment services essential to attain the optimum level of health;
3. Whereas IDPA and IDPH wish to set forth their understanding of the arrangements for reimbursement for care and services under Title V programs and projects to those eligible for medical assistance;

Now therefore, the parties agree as follows:

Responsibilities

Illinois Department of Public Aid:

- A. IDPA has the sole responsibility to establish eligibility of clients to receive benefits under the State's Medicaid Program in accordance with applicable federal and state statutes and regulations.
- B. IDPA is to assure appropriate referral of Medicaid recipients to Title V programs and make available supportive services such as transportation to the source of medical care as authorized under the federal regulations and the IDPA state plan for Medicaid. Procedures for IDPA referral are included in Appendix A. These procedures will be reviewed at least annually.

Illinois Department of Public Health:

- A. IDPH has the sole responsibility to establish eligibility of parents and children for its health services under the State Maternal and Child Health Program in accordance with applicable federal and state statutes and regulations.
- B. IDPH agrees to assure that those parents and children eligible for Medicaid who meet the Title V eligibility requirements are accepted by Title V projects.

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- C. IDPH agrees to assure referral of Title V program patients to IDPA for determination of their eligibility for Medicaid should such patients exhibit financial need and satisfy other eligibility requirements contained in the Social Security Act.
- D. IDPH agrees to require each Title V grantee which meets criteria under state and federal regulations for enrollment to seek to become a "Vendor" for Medicaid recipients as set out below for health and medical services provided by the program for patients eligible under the program. It is understood that Medicaid payments will be made only to projects which meet Medicaid requirements for participation.

Informing Staff

IDPA and IDPH are responsible for informing their respective pertinent administrative and field staff of the interagency relationship described herein.

Delivery of Services

Services provided by Title V projects which shall be available to Medicaid recipients and reimbursable by IDPA include prenatal care; delivery and postpartum care; newborn examination and therapeutic services; child health supervision; Early Periodic Screening, Diagnosis and Treatment services for clients under 21 years of age; and family planning services. IDPH shall determine standards of quality and the range of services provided by individual Title V grantees. A brief description of these services is contained in Appendix B.

Incidental to their primary functions, IDPH Title V projects are to identify, as early as possible, Title XIX eligible children who have not received EPSDT screening services and have missed required periodic examinations or require treatment services identified during screening examinations. IDPH will advise and assist patients to achieve necessary EPSDT services.

IDPH will assist IDPA in developing a medical advisory committee for the EPSDT program to review and make recommendations to IDPA's Medicaid Administration regarding screening methodologies and referral criteria, and to participate in analysis and evaluation of program activities and results.

Confidentiality

IDPH and IDPA shall follow the requirements of Federal Regulations regarding confidentiality of information concerning eligible recipients. Access to such information shall be limited to IDPA and IDPH to such personnel at IDPH and IDPA who require the information to perform their duties and to such others as may be authorized under these respective regulations by IDPA and IDPH. In addition, when confidential information is exchanged by IDPH and IDPA, it is

understood that the following rules apply: (1) the confidential nature of the information must be preserved; (2) the information furnished must be used only for the purposes for which it was made available; (3) the proper steps will be taken to safeguard the information.

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Data Collection

Since all eligible Title V projects administered under IDPH will be enrolled as direct providers under the State's Medicaid Program, data on services and charges will be collected during the IDPA claims adjudication process.

Record Keeping

IDPH agrees to keep or require Title V projects to keep such records as are necessary to fully disclose the extent of goods and services provided to Medicaid eligible patients receiving health care through its programs and to furnish IDPA with such information regarding payments claimed upon written request.

Reimbursement

Payment will be made to providers of services in accordance with Illinois Medicaid methodology. IDPA reimbursement for IDPH grantees will not be affected by the fact that clients are eligible for the Title V Program. Covered services provided to indigent persons will be reimbursed for eligible clients by IDPA so long as the provider submits charges to other third party payors. Payment will be made pursuant to conditions prescribed in the State's Administrative Rules and the State Plan for the administration of Title XIX.

Joint Review, Evaluation and Planning

State level administration of the Title V and Title XIX programs and coordination of interrelated activities and programs described herein are the responsibilities of the Division of Family Health for IDPH and the Division of Medical Programs for IDPA. Each division shall appoint a staff person to have liaison responsibilities for Title V - Title XIX interrelationships.

This agreement shall be periodically reviewed as follows:

- A. Annual Basis: At least once a year the entire agreement shall be reviewed by IDPH and IDPA. Such review will be for the purpose of evaluating policies covering Medicaid services related to Title V programs, to determine their adequacy to meet program goals and to make recommendations for revisions or new policies and procedures.
- B. Periodic Review: At the request of either agency, a formal review may be scheduled to plan modifications or enlargements to this agreement.

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Termination

Either party may terminate this Agreement with 30 days written notice to the other. In the event of termination, IDPA shall reimburse Title V grantees for all services rendered in accordance with the terms of this Agreement and pursuant to IDPA rules and regulations, upon receipt by IDPA of bills for such services. However, should any portion or portions of this Agreement be found to be illegal, the said portion or portions shall not be construed to render the entire agreement void, but shall be severed from the Agreement upon such finding.

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STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC AID

By William L. Kempiners
William L. Kempiners
Director of Public Health

By Jeffrey C. Miller
Jeffrey C. Miller
Director of Public Aid

Date 18 January 1982

Date April 1, 1982

5-21-82

4-1-82